

Department of Health and Human Services Health and Environmental Testing Laboratory 221 State Street

= 12 State House Station

Augusta, Maine 04333-0012

Tel: (207) 287-2727; Fax: (207) 287-6832

TTY: 1-800-606-0215

ERIN TRAINOR US ENVIRONMENTAL PROTECTION AGENCY

11 TECHNOLOGY DRIVE NORTH CHELMSFORD MA 01863

Fax#:

Project Name: ECOLI SAMPLES

No. of Samples in Folder:

I031458001 1031458002 Logged:

Released:

7/9/2013

4:51:00PM

Folder/ Invoice #

I031458

Office Use Only: Line Item USEPA3

Case #:

7/12/2013

CERTIFICATION

The HETL hereby certifies that all test results for this report were analyzed by the method listed and meet all NELAC requirements, unless otherwise noted.

Kenneth G. Pote, PhD., Director

Richard French, Quality Assurance Officer

If we can be of further assistance to you, Please Call us at 287-1716

Approved by:

Thomas Crosby

Inorganics Supervisor/Chemist III

Thomas Crosby

MAINE HEALTH AND ENVIRONMENTAL TESTING LABORATORY - Visit our Web Site at: http://www.state.mc.us/dhs/ed 221 State Street, Station #12 Department of Human Services Augusta, Maine 04333 Tel. No. 207-287-1716 Fax. No. 207-287-6832

| Continued from Previous Page | | HE | IL Folder Number: | I031458 | | | |
|------------------------------|------------|---------------|-------------------|--------------|---------------|----------------|-------------------|
| HETL Sample Number: | 1031458001 | | | | Description: | CS011 NP-H20 | |
| Matrix: NP-H20 | | | | | Sample Point: | | |
| Sampler: ALEX ROSEN | IBERG | | | | Sample Date: | 7/9/2013 | Time: 12:00:00 |
| Analyte | Result | Units | Qualifier | RL | Method | Analyst | Analysis Datetime |
| E. coli | 687 | MPN/100 ml | | 1.0 | 9223 B | johne | U7/09/2013, 18:08 |
| HETL Sample Number: | I031458002 | | | | Description: | K-TRIB NP-H20 | |
| LIETT SHIDE LAMIDEE. | 1031430002 | | | | • | K-1 KID NP-H20 | |
| Matrix: NP-H20 | | | | | Sample Point: | | |
| Sampler: ALEX ROSENBERG | | | | Sample Date: | 7/9/2013 | Time: 13:05:00 | |
| Analyte | Result | Units | Qualifier | RL | Method | Analyst | Analysis Daterime |
| E. coli | 95. | MPN/100 | | 1.0 | 9223 B | johne | 07/09/2013, LEGB |

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HETL Folder Number:

I031458

Units & Measurement

"mg/L" = Milligrams per liter, "ug/L" = Micrograms per Liter, "mg/Kg" = Milligrams per Kilogram; "mg/Kg" = Micrograms per Kilogram; "PPM" = Parts per Million; "NTU" = Nephelometric Turbidity Units;

All solid results on a "Dry Weight" basis

NC = Not confirmed NQ = Not Quantitated NA = Not Analyzed J = Approximately U = Undetected R = Rejected

RL-Reporting Limit, the lowest concentration which can be reliably reported on a routine basis

">" = Less than ">" = Greater than

Note: Results below the advisory limit, including < and K are considered satisfactory for that parameter.

Disclaimer

Your report consists of the number of pages listed on the cover page. Any attachments after the last numbered page are for informational purposes only and not part of the formal report.

The results in this report are for the submitted sample(s) only.

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State of Maine

Health and Environmental Testing Lab

221 State Street Station #12 Phone (207) 287 – 2727 Augusta, ME 04333-0012 Fax (207) 287-1884 Chain - of - Custody

I031458

Sample Date: 7/9/13
Town/County: Bungar ME 07-07

| Address O1863 | N | | | |
|--|-----------|--|--|--|
| NORTH CHEIMSFORD, MA Kit # 233048 Address: Address Address Address | | | | |
| Address O1863 PECOLI QU'ANT-EFFLUENT 1031458 USEPA3 Phone: This kn expires on: 75 2014 Phone: Fax: Phone: Phone: Fax: Phone: Fax: Phone: | | | | |
| Phone: This kin expires on: 75 2014 e-Mail a Sample Image: Sample ID Sample Image: Sample ID Sample Image: Sam | | | | |
| Phone: This kin expires on: 75 2014 e-Mail a Sample Image: Sample ID Sample Image: Sample ID Sample Image: Sam | | | | |
| e-Mail address: e-Mail address | | | | |
| 6-11-01-01-00-11/15 7 E.Coli (Yugat Effluent 103/4 K-71-6 3/13:05 G WW | | | | |
| 6-11-01-01-00-11/15 7 E.Coli (Yugat Effluent 103/4 K-71-6 3/13:05 G WW | _ Number | | | |
| K-T1.6 3 13:05 1 G WW | 58-001 | | | |
| C5011 12 00 1 G WW | 002 | | | |
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| | - 604 | | | |
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| Notes: Begingation Sodium Throspitano | | | | |
| Sampled By ALCX Roserberg Date/Time 7/9/13 Received By 0 14 Date/Time | | | | |
| | | | | |
| Relinquished By Date/Time Date/Time Date/Time 7/1/2013 1645 | | | | |
| Relinquished By Date/Time Received By Date/Time | Date/Time | | | |
| Rush (Yes or No) Fax Results (Yes or No) Custody seal intact (Yes or No) Temperature on Arrival | ъС | | | |